

# IMPLEMENTATION OF AN INJURY PREVENTION PROGRAM MANUAL



## Engaging an Organization in the Prevention of Work Related Injuries

Developing and utilizing a visual display to support an injury prevention program to help minimize work related injuries for healthcare workers.

Researched and developed by St. Boniface Hospital

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## IMPLEMENTATION OF AN INJURY PREVENTION PROGRAM

The following manual will assist readers in the development of their own visual display of injuries; outlining occupational health and safety system requirements, and detailed communication plans. Should the reader have interest in further details regarding other elements of a successful Health and Safety Program consider contacting Safe Work Manitoba for further guidance.

### Occupational Health & Safety Management System

#### What is a Health and Safety Management System?

A health and Safety Management System utilizes processes that are designed to decrease the number of incidents and illnesses occurring in a workplace. Success of the system relies heavily on the management commitment to the system, allocation of resources, and employee participation in the system. The scope and complexity of a Health and Safety Management System will vary according to the size and type of workplace. An effective program will meet all of the legislated workplace safety and health requirements in the province of Manitoba. For further information regarding the requirements please see *appendix 1*.

The following elements are the basic components to a Health and Safety Management System. Elements to this system are interdependent upon each other and are the building blocks to a successful Health and Safety Program (Work Safe Manitoba, 2010):

1. Policy
2. Identifying and Controlling Hazards
3. Emergencies
4. Roles & Responsibilities
5. Inspections
6. Chemical & Biological
7. Contractor
8. Training
9. Investigation
10. Participation
11. Evaluation

#### Incident Reporting, Investigation & Data Management

##### THE REPORT:

Following an incident, near miss or illness employers must have a system in place for employees to report the occurrence. The report should include details regarding the following:

- Personal information (name, phone number, job title etc.)
- Detailed location of where the incident occurred
- Date and time of the incident
- Time the incident was reported
- Whether the it was an incident resulting in injury, near miss or an illness
- If this incident resulted in a report only, first aid, medical aid or lost time away from work
- The body parts injured
- Cause(s) of injury
  - i.e.) Bite, indoor/outdoor fall, lifting/lowering, etc.
- A description of the incident

- Interim corrective actions utilized to minimize risks
  - i.e.) should a slip occur as a result of water on the floor, an appropriate interim corrective action would remove the water from the floor to prevent reoccurrence of the incident.

This report should be filled out immediately following an incident so that all pertinent details are recorded. Reports should then be provided to managers or in-charge persons for completion of an investigation into the root cause of the incident so that appropriate long term corrective actions can be put in place to reduce the risk of repeat incidents.

Please see *appendix 2* for a sample incident report form.

#### THE INVESTIGATION:

An investigation is undertaken following an incident to identify any risks which have yet to be identified or risks which have previously been identified, controls that have been put in place but have not mitigated these risks for employees. Investigations should identify hazards, root causes for the incident and implement corrective actions in order to prevent similar incidents from occurring again.

#### DATA MANAGEMENT

An organization must have a means of tracking incident which occur in their facility. St Boniface Hospital is fortunate in that it has an Incident Tracker System which collects all data related to incidents which are reported. We are able to run reports and select certain data sets, such injury cause, location, body part affected etc. in order to determine specific information for our visual display of injuries. Without a computerized system, an organization must determine a way to collect data from incident reports and investigations and store it so that the data maybe further analyzed in the future, as well as used for populating the display.

Simple weekly/monthly tally tables can be an easy way for organizations to track statistics related to incidents:

Incident Description	Time Loss Claim	Injury Cause	Location	Body Part Affected
Jane Smith slipped and fell on her right knee on the sidewalk outside the hospital main entrance due to ice.	Yes	Slip	Main Entrance	Right Knee
John Doe twisted his back while lifting a heavy box from the floor.	No	Lifting	Storage Room D-block Room # E2017	Lower Back

Based on this information an organization is able to identify if any incident trends are occurring in your facility. It will also assist with populating a display of injuries as it contains all pertinent information for the display.

## The Visual Display of Reported Injuries

### Property Map

Management teams will receive a map of the designated areas that their employees work in. This is to identify the location of the injury that took place.

Immediately following the incident, the manager (other designate) will be responsible to update the area map with colour coded dots to identify where in that location the injury took place. A red dot will identify the injury of the employee from that area; a blue dot will identify an employee from another area that was injured in this specific location, any of these injuries resulting in time loss will be identified with an "X" in the coloured dot.

Please see appendix 3 for sample map and appendix 3.1 for a sample property map with dots.

### Cause(s) of Incident(s) Chart

By targeting the specific location to which the injury took place and where an employee injured them self it will present opportunities to identify any trends and behaviours that can be rectified. With a root cause analysis it can further determine what can be done to prevent the injuries from taking place, i.e.: back care training, are personal protective equipment being used, is it a result of a particular season, etc.

When determining what themes to include with your visual display of injuries a number of factors should be considered:

- Top causes of incidents occurring
- Severity of incidents
- Seasonal causes of incidents (i.e. slips, trips & falls, heat exhaustion etc.)
- WCB legislation, employer responsibilities, staff training

With these items in mind you will be able to determine what the pertinent areas are for your review throughout the year. Some examples of potential themes could include:

- |                             |                            |
|-----------------------------|----------------------------|
| • Blood/Body Fluid Exposure | • Fracture/Dislocation     |
| • Bruise/Crush/Abrasion     | • Infection/Infestation    |
| • Burn/Scald                | • Psychological            |
| • Chemical/Heat Exposure    | • Repetitive Strain Injury |
| • Cut/Laceration/Puncture   | • Sprain/Strain            |
| • Concussion                | • Verbal Abuse             |
| • Electrical Shock          |                            |

From there, you can break it down further and create criteria that would fall in the categories listed above. Such as:

- |   |                                 |
|---|---------------------------------|
| • Agitation / anger                                 | • Obstacle on path causing fall |
| • Animal/Insect bite                                | • Outdoors fall                 |
| • Assist patient to walk / stand                    | • Preventing a fall             |
| • Blood/body fluid spill/splash                     | • Pulling                       |
| • Caught in / under / between wall, equipment, door | • Pushing                       |
| • Chemical  | • Reaching                      |
| • Cold / heat / noise                               | • Repetitive strain             |
| • Communicable disease / microorganism              | • Repositioning patient         |

- Dementia
- Dust / allergens
- Electrical
- Human bite
- Indoors fall
- Lifting / lowering
- Lifting patient
- Mental Health
- Needle Stick
- Sharp object
- Struck / bumped / banged / rubbed / abraded / hit by
- Substance abuse
- Transferring patient
- Twisting
- Unexpected patient movement
- Verbal abuse
- Wet /Slippery surface causing fall

Please see appendix 4 for sample Cause(s) in Incidents(s) chart and appendix 4.1 for sample Cause(s) in Incidents(s) chart with dots.

### **Body Map Diagram**

Management teams will receive a body map that show the front and back sides of the human body. This is to identify where on the body the employee was injured.

Immediately following the incident, the manager (other designate) will be responsible to update the body map with colour coded dots to identify where on the body the injury took place. A red dot will identify the injury of the employee from that area; a blue dot will identify an employee from another area that was injured in this specific location, any of these injuries resulting in time loss will be identified with an "X" in the coloured dot.

Please see appendix 5 for sample body map and appendix 5.1 for a sample body map with dots.

### **Communication Plan**

Managers are to have daily conversations with their teams regarding workplace injuries. Discussions around injury prevention will be integrated into the team huddles where employees can participate in conversation by coming up with strategies that they believe are beneficial in creating a safer work environment. Creating awareness, engagement and knowledge transfer around injury prevention will help foster healthy conversations on how to stay safe in the workplace. Development of a Standard Work process can be created to foster ongoing conversations.

Please see appendix 6 for a sample of the Use of a Visual Display and appendix 7 for a sample of The Conversations around the Visual Display.

### **Putting the Visual Display together**

The Property Map and the Cause(s) of Incident(s) chart are printed on an 8x10 letter sized paper. The Body Map Diagram is printed on an 11x17 ledger size paper. All 3 forms should be placed onto a larger poster paper. The full visual display should measure roughly 23.5"x21.5" in size.

The visual display should be placed in an area where all employees have access to see, ideally where the daily huddles take place as it can be used as a point of reference.

The dots should be updated shortly after an incident has been reported, and updated by management or their delegate (not the employees who reported an incident).

Please see appendix 8 for a sample of the Visual Display.

## APPENDICES

### Appendix 1- Workplace Safety & Health Act

#### Workplace Safety & Health Program

##### CONTENT OF PROGRAM

7.4(5) A workplace safety and health program must include:

- (a) a statement of the employer's policy with respect to the protection of the safety and health of workers at the workplace;
- (b) the identification of existing and potential dangers to workers at the workplace and the measures that will be taken to reduce, eliminate or control those dangers, including procedures to be followed in an emergency;
- (c) the identification of internal and external resources, including personnel and equipment, that may be required to respond to an emergency at the workplace;
- (d) a statement of the responsibilities of the employer, supervisors and workers at the workplace;
- (e) a schedule for the regular inspection of the workplace and of work processes and procedures at the workplace;
- (f) a plan for the control of any biological or chemical substance used, produced, stored or disposed of at the workplace;
- (g) a statement of the procedures to be followed to protect safety and health in the workplace when another employer or self-employed person is involved in work at the workplace that includes
- (i) criteria for evaluating and selecting employers and self-employed persons to be involved in work at the workplace, and
- (ii) procedures for regularly monitoring employers and self-employed persons involved in work at the workplace;
- (h) a plan for training workers and supervisors in safe work practices and procedures;
- (i) a procedure for investigating accidents, dangerous occurrences and refusals to work under section 43;
- (j) a procedure for worker participation in workplace safety and health activities, including inspections and the investigation of accidents, dangerous occurrences and refusals to work under section 43;
- (k) a procedure for reviewing and revising the workplace safety and health program every three years or more often if circumstances at a workplace change in a way that poses a risk to the safety or health of workers at the workplace; and
- (l) any other requirement prescribed by regulation.

(Manitoba, 2015)

## Appendix 2

### Sample Injury Report

#### Incident Basics

**Employee Name:**  
**Position:** Registered Nurse (N2)  
**Home Phone:**  
**Manager:**  
**Director:**  
**Date of Occurrence:** July 5, 2018 23:00  
**Date Reported:** July 5, 2018 23:37  
**Reported by:**

#### Incident Details

**Incident Type:** Illness/Injury  
**Location:** Treatment Room  
**Equipment/Property Damage:**  
**Location specifics:** treatment area  
**Description:** Assisting pt to hold pressure on fistula needle site after hemodialysis- while taking over holding for pt, blood sprayed from AV fistula onto lips, and maybe into mouth.  
**Interim Corrective Actions:** No action taken  
**Reporting Delay?** No delay

#### Illness/Injury Details

**Illness/Injury Type(s):** Blood/body fluid exposure  
**Region(s) of Body Affected:** None  
**Illness/Injury Cause(s):** Blood/body fluid spill/splash  
**Work Missed:** No work missed

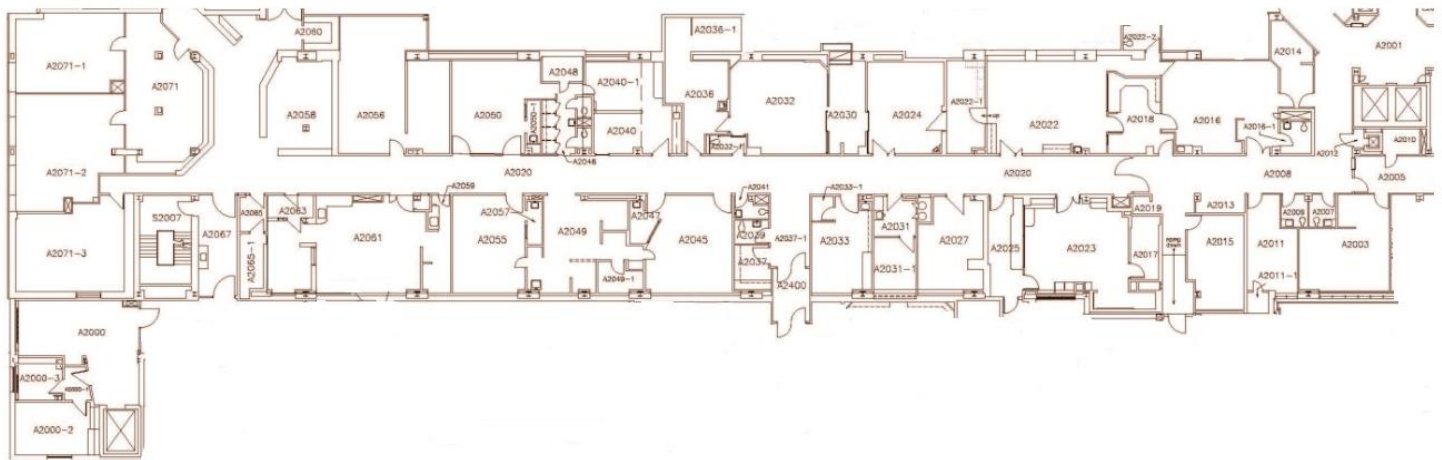
#### Witnesses

**Witness Name(s):** No witnesses



## Appendix 3

### Sample Property Map



Appendix 3.1

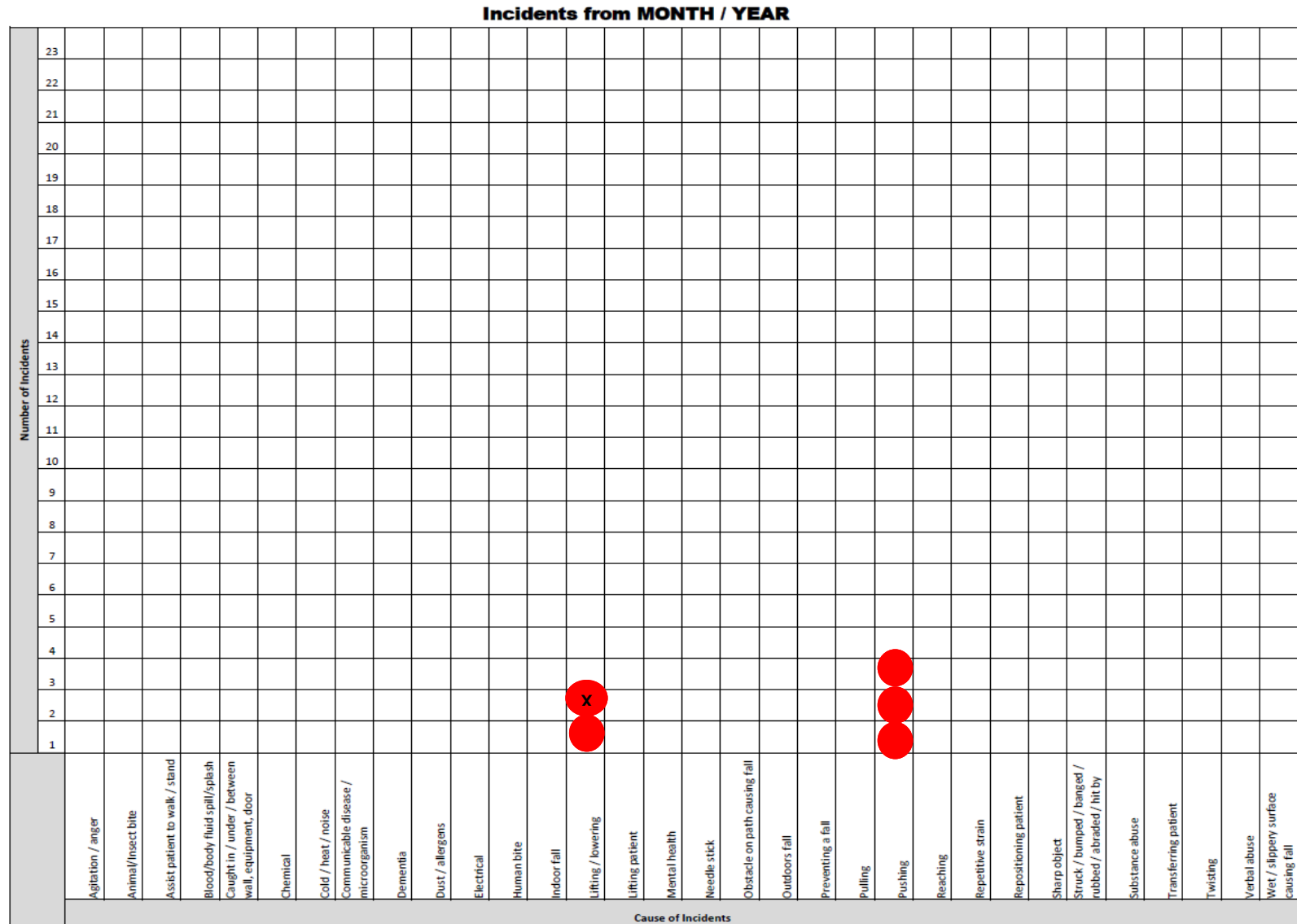
Sample Property Map with Dots





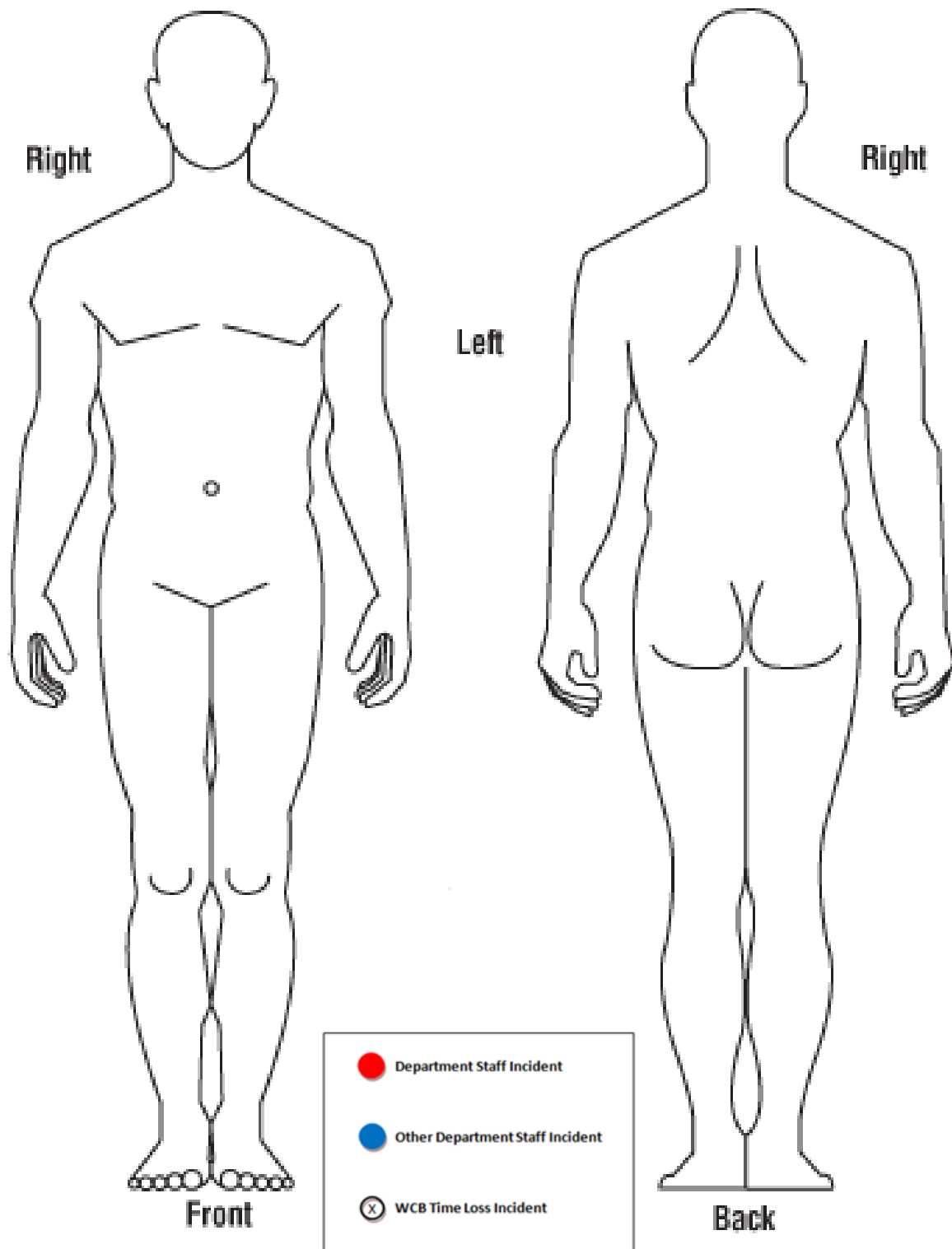
## Appendix 4.1

## Sample of Causes of Injuries with dots



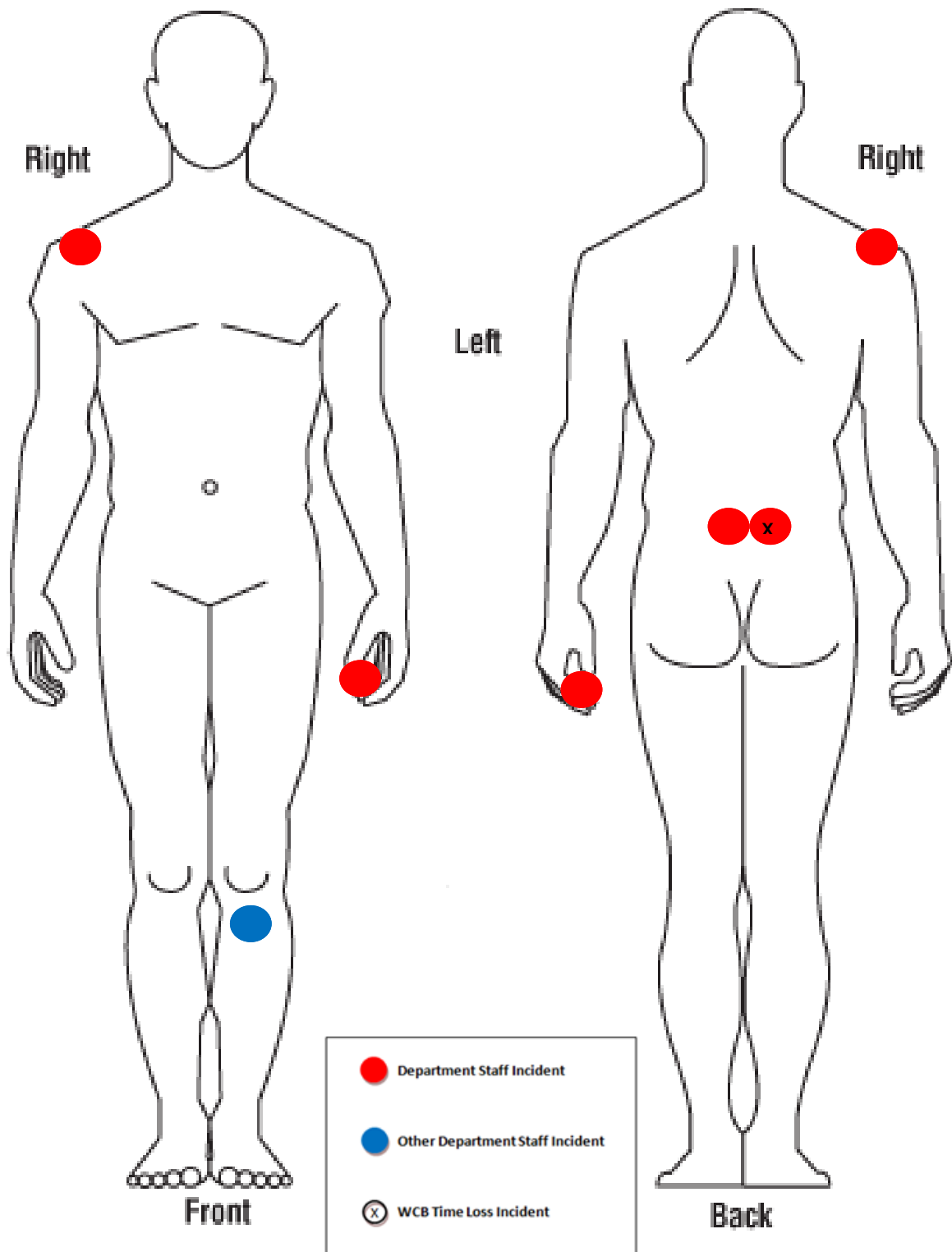
## Appendix 5

### Sample Body Map Diagram



## Appendix 5.1

### Sample Body Map Diagram with Dots



## Appendix 6

### Sample of Use of a Visual Display

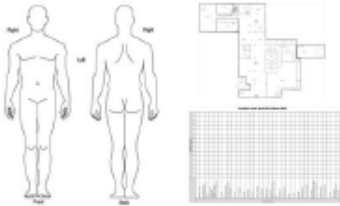
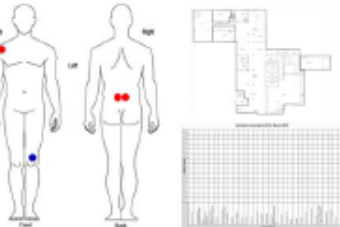


Hôpital St-Boniface Hospital

#### Standard Work

<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Use of a Visual Display
<p><b>Purpose:</b> <i>To have a daily conversation with employees and have a clear and shared understanding of the current health and safety risks, key updates and acknowledgments that have occurred in the last week or are expected to occur in the next week as well as any shared learning from risks that have been resolved.</i></p> <p><b>Results:</b></p> <ul style="list-style-type: none"> <li>• Have a daily visual tracker of what types of employee injuries are occurring in the area/unit</li> </ul>			
<p><b>Definitions:</b></p> <p><i>Risk</i> –Something that increases the possibility of an incident occurring. Something that has either happened already or has a potential for occurring.</p> <p><i>Consultation</i> – Requires a deliberate discussion with an expert or peer professional in order to seek advice.</p>			
<p><b>Roles &amp; Expectations:</b></p> <ul style="list-style-type: none"> <li>• <i>Facilitator</i> – Starts the huddle by setting out objectives and rules; ensures that the huddle keeps moving and is focused, and summarizes what actions need to be taken after the huddle</li> <li>• <i>Recorder</i> – Records on flip chart all identified risks, updates and actions.</li> <li>• <i>Observer/Coach</i> – Observes the overall functionality of the huddle, including: take time, risk identification, problem-solving during the huddle and blaming. Coaches individuals after the huddle.</li> </ul> <p>An up to date visual display of injuries will be maintained for each unit and department at SBH. The visual display will outline areas of the hospital where incidents are occurring, the most injured body part for each incident as well as unit/department specific information regarding injury trends, opportunities for improvement and tips for staff safety.</p>			
<p><b>Ground Rules or Key Assumptions:</b></p> <ul style="list-style-type: none"> <li>• Start on time</li> <li>• One speaker at a time</li> <li>• No problem-solving during the huddle</li> <li>• No blaming</li> <li>• Be prepared</li> <li>• Full attention given (i.e. no checking phones)</li> </ul>		<p><b>Supporting Tools:</b></p> <ul style="list-style-type: none"> <li>• Body Map</li> <li>• Area/Unit map</li> <li>• Cause(s) Graph</li> <li>• Incident tracker</li> </ul>	

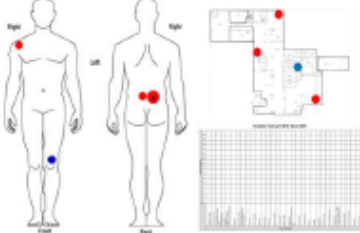
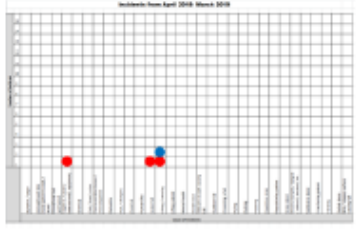
<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Use of a Visual Display
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Step #	Description	Key Points / Images	Reasons Why	Who	Time
	<p>An injury prevention display will be posted in a highly visible location in your unit/department. The display will consist of the following:</p> <ul style="list-style-type: none"> <li>- An A3 sized body map diagram</li> <li>- A letter sized map of your department/unit</li> <li>- A letter sized cause of illness/injury chart</li> </ul>			Manager or their designate	Each fiscal year
	<p>Once the display has been set up, following the notification of a work related incident, managers will update the visual display of injuries. Colour coded dots will be utilized:</p> <ul style="list-style-type: none"> <li>- Red dots will be utilized to identify injured staff from your unit/department</li> <li>- Blue dots will be utilized to identify injured staff from other departments/units who are injured in your area</li> </ul>		<p>Departments/units will order and keep stock of the following items from Grand and Toy in order to populate their display:</p> <ul style="list-style-type: none"> <li>- Red dots item id #: 14001-0</li> <li>- Blue dots item id #: 14003-0</li> </ul>	Manager or their designate	As needed





<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Use of a Visual Display
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Step #	Description	Key Points / Images	Reasons Why	Who	Time
	<p>Display will be populated with the colour coded dot to highlight the following:</p> <ul style="list-style-type: none"> <li>- Location of the incident</li> <li>- Most affected body part</li> <li>- The cause of injury/illness</li> <li>- If time loss occurred as a result of the incident</li> </ul> <p>It will be identified by an X through all dots associated with the incident</p>			Manager or their designate	After an incident
	<p>Run Chart will be populated to highlight the following:</p> <ul style="list-style-type: none"> <li>- Number of occurrences</li> <li>- Tracking of different causes of injuries</li> </ul>			Manager or their designate	After an incident
	<p>On a daily basis all unit/department managers will review with staff, their visual display of injuries to determine if there are any trends occurring in their area/unit.</p>	<p><i>If no injuries occurred over the last 24 hours/weekend, <b>celebrate</b> that no one was injured.</i></p> <p>If an injury had occurred, review the following:</p> <ul style="list-style-type: none"> <li>- Location of the incident</li> <li>- Most affected body part</li> <li>- The cause of injury</li> <li>- If time loss occurred as a result of the incident</li> </ul> <p>Ask staff what could be done to prevent/mitigate the injury</p> <p>What standards are out there</p>	<p>Safety conversations may be integrated with shift to shift huddles or the areas management system improvement huddles</p>	Manager or their designate	Daily



<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Use of a Visual Display
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Step #	Description	Key Points / Images	Reasons Why	Who	Time
	Data collected based on incidents occurring in the area of concern will be reviewed and compared to determine if any trends exist.			Manager and HR	As needed
	The display will be populated in this way for each fiscal year. April 1 of each year a new copy of each of the display elements will be posted: <ul style="list-style-type: none"> <li>- Location map</li> <li>- Body map diagram</li> <li>- Injury/illness cause chart</li> </ul>			Manager or their designate	Annually on April 1 <sup>st</sup>
	All display items can be kept for reference and comparison from previous years.			Manager and HR	Annually on April 1 <sup>st</sup>

## Appendix 7

### Sample of Conversations around the Visual Display



Hôpital St-Boniface Hospital

#### Standard Work

<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Conversations around the Visual Display
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**Purpose:** To have a daily conversation with employees and have a clear and shared understanding of the current health and safety risks, key updates and acknowledgments that have occurred in the last week or are expected to occur in the next week as well as any shared learning from risks that have been resolved.

**Results:**

- Have a daily visual tracker of what types of employee injuries are occurring in the area/unit

**Definitions:**

**Risk** –Something that increases the possibility of an incident occurring. Something that has either happened already or has a potential for occurring.

**Consultation** – Requires a deliberate discussion with an expert of peer professional in order to seek advice.

**Roles & Expectations:**

- **Facilitator** – Starts the huddle by setting out objectives and rules; ensures that the huddle keeps moving and is focused, and summarizes what actions need to be taken after the huddle
- **Recorder** – Records on flip chart all identified risks, updates and actions.
- **Observer/Coach** – Observes the overall functionality of the huddle, including: take time, risk identification, problem-solving during the huddle and blaming. Coaches individuals after the huddle.

An up to date visual display of injuries will be maintained for each unit and department at SBH. The visual display will outline areas of the hospital where incidents are occurring, the most injured body part for each incident as well as unit/department specific information regarding injury trends, opportunities for improvement and tips for staff safety.

**Ground Rules or Key Assumptions:**

- Start on time
- One speaker at a time
- No problem-solving during the huddle
- No blaming
- Be prepared
- Full attention given (i.e. no checking phones)

**Supporting Tools:**

- Body Map
- Area/Unit map
- Cause(s) Graph
- Incident tracker

Step #	Description	Key Points / Images	Who	When
1.	Gather together	Every shift change, meet in the NAME OF LOCATION.	Manager Supervisor All staff	Every Shift Change



System:	Employee Injury Prevention	Process:	Conversations around the Visual Display	
2.	Introduction/ Ground Rules	Facilitator opens huddle by briefly explaining the objective of the huddle.	Facilitator	
3.	Follow up	Review any follow up on identified risks and corrective actions identified during the last huddle.	Facilitator, any staff	20s Takt time
4.	Review identified risks occurring since the last huddle	Review any new incidents, hazards and risks which have occurred in food services since the last huddle:  If uncomfortable reviewing info regarding a specific incident, remind staff about the hazard which caused the incident.  i.e.) slip, trip, fall incident remind staff to clean up spills as soon as they are identified.	Facilitator	After follow up
5.	Round Table	Q1: Ask staff: Do you have any concerns related to potential risk today?  Q2: Ask Staff: Do you have the PPE you need to prevent burns? (leave this question out until we have new products)  Q3: Ask staff: Have you identified any new safety risks?	Facilitator & All staff in attendance	After Corrective action review
6.	Recognitions	Ask: Are there any recognition for working safely?	Facilitator & all staff in attendance	After round table
7.	Huddle Closes	Facilitator announces that the huddle has concluded.	Facilitator	After recognitions



## Standard Work

<b>System:</b>	Employee Injury Prevention	<b>Process:</b>	Conversations around the Visual Display
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8.	<b>Document risks/ updates and actions</b>	Post huddle, the Recorder will update: The Action log and send to the Manager of Food Services and all Supervisors.	Recorder	Within one hour of huddle
9.	<b>Process Insights</b>	Gather insight of what is going well, not going well and what can be improved and any key learning.	All employees	Weekly

## Appendix 8

### Visual Display

